



TRANSMITTAL FORM

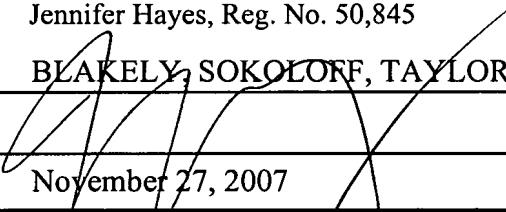
(to be used for all correspondence after initial filing)

		Application No.	10/781,314
		Filing Date	February 17, 2004
		First Named Inventor	Youzhi E. Xu
		Art Unit	1733
		Examiner Name	Justin R. Fischer
Total Number of Pages in This Submission	13	Attorney Docket Number	42P13563D

ENCLOSURES (check all that apply)

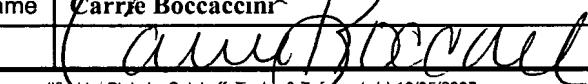
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> <div style="border: 1px solid black; padding: 5px; height: 100px; width: 100%;">Return Postcard</div>	
			<input type="checkbox"/> After Allowance Communication to TC
			<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
			<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
			<input type="checkbox"/> Proprietary Information
			<input type="checkbox"/> Status Letter
			<input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> <div style="border: 1px solid black; padding: 5px; height: 100px; width: 100%;">Return Postcard</div>
			<input type="checkbox"/> After Allowance Communication to TC
			<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
			<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Jennifer Hayes, Reg. No. 50,845 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP	
Signature		
Date	November 27, 2007	

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or printed name	Carrie Boccaccini		
Signature			
	Date	November 27, 2007	

Based on PTO/SB/21 (10-07) as modified by Blakely, Sokoloff, Taylor & Zafman (wir) 10/05/2007.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450



FEE TRANSMITTAL for FY 2007

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT **(\$)** **0.00**

Complete if Known

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First Named Inventor	Youzhi E. Xu
Examiner Name	Justin R. Fischer
Art Unit	1733
Attorney Docket No.	42P13563D

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Credit any overpayments
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	<input checked="" type="checkbox"/> Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) during the pendency of this application.	

FEE CALCULATION

1. EXTRA CLAIM FEES

		Extra Claims	Fee from below	Fee Paid
Total Claims	15	20* =	0 X 50.00 =	\$0.00
Independent Claims	3	3* =	0 X 210.00 =	\$0.00
Multiple Dependent				

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	50	2202	25	Claims in excess of 20
1201	210	2201	105	Independent claims in excess of 3
1203	370	2203	185	Multiple Dependent claim, if not paid
1204	810	2204	405	**Reissue independent claims over original patent
1205	810	2205	405	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (1)		(\$)	0.00	

**or number previously paid, if greater. For Reissues, see below

2. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	0.00
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	0.00
2053	130	2053	130	Non-English specification	0.00
1251	120	2251	60	Extension for reply within first month	0.00
1252	460	2252	230	Extension for reply within second month	0.00
1253	1,050	2253	525	Extension for reply within third month	0.00
1254	1,840	2254	820	Extension for reply within fourth month	0.00
1255	2,230	2255	1,115	Extension for reply within fifth month	0.00
1401	510	2401	255	Notice of Appeal	0.00
1402	510	2402	255	Filing a brief in support of an appeal	0.00
1403	1,030	2403	515	Request for oral hearing	0.00
1451	1,510	2451	1,510	Petition to institute a public use proceeding	0.00
1460	130	2460	130	Petitions to the Commissioner	0.00
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	0.00
1806	180	1806	180	Submission of Information Disclosure Stmt	0.00
1809	810	1809	405	Filing a submission after final rejection (37 CFR § 1.129(a))	0.00
1810	810	2810	405	For each additional invention to be examined (37 CFR § 1.129(b))	0.00
Other fee (specify)				SUBTOTAL (2)	(\$)
				0.00	0.00

SUBMITTED BY

Name (Print/Type)	Jennifer Hayes	Registration No. (Attorney/Agent)	50,845	Telephone	(408) 720-8300
Signature				Date	11/27/07

Based on PTO/SB/17 (02-07) as modified by Blakely, Sokoloff, Taylor & Zafman (w/p) 02/26/2007.
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